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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOC	KET NO. CONFIRMATION NO.
10/603,532	06/25/2003		Michael Joseph Pizzo	13768.40 ANGE INFORMATION THAT C	
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I, Change of correspondence CFR 1.363).  Change of corresponde Address form PTO/SB/12  "Fee Address" indicati PTO/SB/47; Rev 03-02 of Number is required.	ence address (or Chan 2) attached. on (or "Fee Address" r more recent) attache	ge of Correspondence Indication form d. Use of a Customer	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		
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Authorized Signature	Rick D. N	yde <b>f</b> zer	<u> </u>	Date 13 Cottober Registration No. 28,65	<b>3669</b>
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